ISDH 2003 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

Southern Indiana Rehabilitation Hospital

City: New Albany   County: Floyd   Year: **2003**

Provider Type: Rehabilitation

I. Inpatient Care				
Hospital Service Description	Number of Set Up Beds	Number of Discharges	Number of Patient Days	Average Charge Per Discharge
Burn Care	0	0	0	$0
Cardiac Intensive	0	0	0	$0
ICU Med/Surg	0	0	0	$0
ICU Neonatal	0	0	0	$0
ICU Pediatric	0	0	0	$0
Medical/Surgical	0	0	0	$0
Neonatal Intermed	0	0	0	$0
Obstetrics	0	0	0	$0
Pediatric	0	0	0	$0

Psychiatric	0	0	0	$0
Rehabilitation	60	845	10,997	$33,548
Substance Abuse	0	0	0	$0
Swing Beds	NA	0	0	$0
Other Services	0	0	0	NA
Acute Subtotal	60	845	10,997	NA
Normal Newborn	0	0	0	$0

II. Outpatient Visits			
Circulatory System	0	Digestive System	0
Endocrine System	0	Injuries and Poison	0
Mental Disorder	0	Musculoskeletal	17,821
Neoplasms	0	Nervous	0
Respiratory	745	Urinary	0
Other/Unknown	0	Total Visits	18,566
Number of Visits to Emergency Department			0
Percent of Emergency Department Visits of Total Visits			0.0%

Identification of Hospital Services

Each hospital has identified if it has one or more of a standard list of 41 services. This list of services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment.

Y - Acute Renal Dialysis	N - Alcohol/Drug Service	Y - Anesthesia Services
Y - Blood Bank	N - Burn Care Unit	N - Chiropractric Service
N - Coronary Care Unit	Y - Dental Services	Y - Dietetic Services
Y - Emergency Service	N - Home Care Program	N - Hospice
N - Inpatient Surgical Services	N - Intensive Care Unit	Y - Laboratory(Clinical)
N - Laboratory(Anatomical)	N - Long Term Care Unit	N - Neonatal Nursery
N - Nuclear Medicine Services	N - Obstetrics Services	
Y - Occupational Therapy	N - Open Heart Surgery	Y - Operating Room
Y - Optometric Service	N - Organ Bank	N - Organ Transplant
Y - Outpatient Service	Y - Outpatient Surgery Unit	Y - Pediatric Services
Y - Pharmacy	Y - Physical Therapy	Y - Postoperative Recovery
Y - Psychiatric Services	Y - Radiology(Diagnostic)	Y - Radiology(Therapeutic)
Y - Rehabilitation Services	N - Respiratory Services	N - Self Care Unit
N - Shock Trauma	Y - Social Services	Y - Speech Pathology

NA =	Not applicable	NMF =	No meaningful figure	NR =	Not reported

[Health Care Regulatory Services](#)   [2003 Hospital Services Main Page](#)